



October 5, 2020

Web Announcement 2321

**Attention Provider Types 10 (Outpatient Surgery, Hospital Based) and 12 (Hospital, Outpatient):**

**Update Regarding Outpatient and Outpatient Crossover Ambulatory Surgical Center Claims Billed with Anesthesia**

Update to [Web Announcement 2313](#): Outpatient and Outpatient Crossover claims with an Ambulatory Surgical Center (ASC) procedure code and an anesthesia code submitted by provider type (PT) 10 (Outpatient Surgery, Hospital Based) or 12 (Hospital, Outpatient) that mapped to a PT 10 for adjudication instead of a PT 12 have been automatically reprocessed to adjudicate correctly. The impacted claims had dates of service on or after September 1, 2018, through February 1, 2019, and were submitted by a billing provider that has both a PT 10 and PT 12 location with the same NPI for both locations.

Results of the reprocessed claims appear on remittance advices dated October 9, 2020. Please note: When claims are reprocessed, please be aware that all system and clinical claim editor edits are applicable. As a result, there may be no additional payment, and other claim denials may be received. Providers have the right to appeal denied claims, including those denied upon reprocessing. Please refer to [Medicaid Services Manual Chapter 100](#) and the [Billing Manual](#) for information concerning the claim appeal process and time frames.